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ROUTING AND RECORD SHEET  SUBJECT: (Optional)					
0-D/OTE 1026 Co6C			:	DAYE 15 August 1986	
TO: (Officer designation, room number, and building)	0	ATE	OFFICER'S INITIALS	COMMENTS (Number each comment to show from whom	
1. EXO	RECEIVED	FORWARDED	- Internation	to whom. Draw a line across column after each comment.	
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15 August 1986

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MEMORANDUM FOR:	OTE Division Chiefs
FROM:	
	Training Officer, OTE

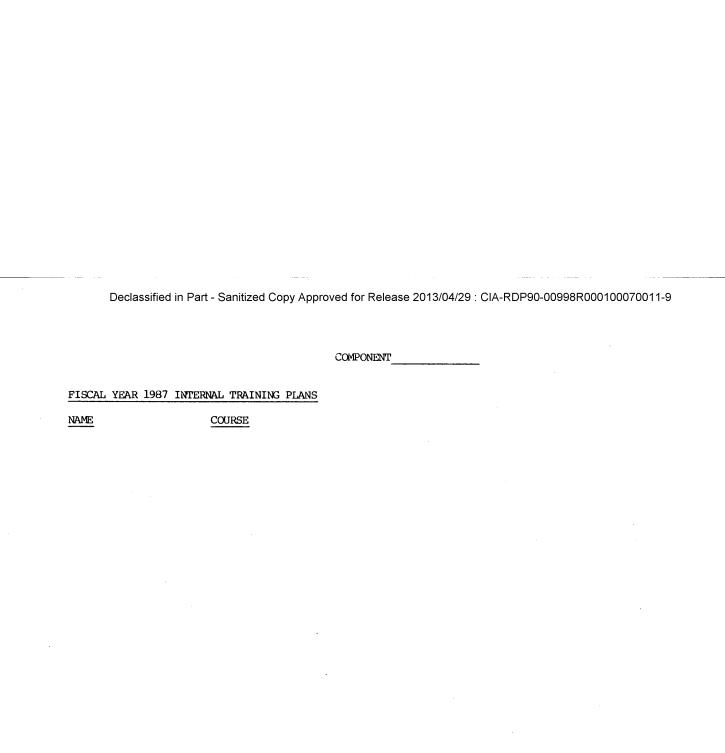
SUBJECT:

Fiscal Year 1987 Training Plans

- 1. It is time for submission of the FY 1987 training plans. Please submit by 19 September 1986 the internal and external training plans for employees in your division. The attached forms should be utilized.
- 2. This past year has been one in which OTE has made substantial gains in support to our careerists for training and developmental opportunities. I believe we have accomplished this while maintaining the integrity of the program in assuring the relevance of the training to OTE's and the Agency's mission. That accomplishment has been largely due to the effort put forth by you to examine the needs of your people and support and advise them on training and other developmental opportunities. I look forward to FY87 as a similar positive effort. With the additional emphasis being placed by the Office on career development, there is added need to plan for and encourage careerists to seek appropriate training opportunities.
- 3. This training plan will be the main reference for projecting budget requirements for training. This does not mean that we will be limited to only those programs listed in the resulting document. However, submission of a training plan for an individual through this mechanism will go a long way toward assuring that the individual receives the desired training. It should be reemphasized that this should not be a simple compilation of what is submitted to you, but, instead, a jointly agreed upon program between you and the people in your division. Following submission of your plans, I will meet with each of you to discuss them and resolve any questions.

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Attachment



NAME TITLE OF COURSE LOCATION DATES EST COST
OR CONFERENCE

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